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# UNITED STATES DISTRICT COURT 8 PM 3: 07 SOUTHERN DISTRICT OF NEW YORK

Einest Calvino Sr	-0077 116
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Write the full name of each plaintiff.	(Include case number if one has beer assigned)
-against-	COMPLAINT
Holyoke City Massachusetts	— Do you want a jury trial? ☑ Yes □ No
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· ·	
Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.	

## **NOTICE**

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

## I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?
☐ Federal Question
☐ Diversity of Citizenship
A. If you checked Federal Question
Which of your federal constitutional or federal statutory rights have been violated?  Misleading Me and other, corruption
B. If you checked Diversity of Citizenship
1. Citizenship of the parties
Of what State is each party a citizen?
The plaintiff, Ernest Calino, is a citizen of the State of (Plaintiff's name)
New york
(State in which the person resides and intends to remain.)
or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of
If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual:		
The defendant, Holyok (Defendant's r	ce City	, is a citizen of the State of
subject of the foreign state of		nce in the United States, a citizen or
If the defendant is a corporation		•
The defendant,		, is incorporated under the laws of
the State of		
and has its principal place of b	usiness in the State	e of
or is incorporated under the la	ws of (foreign state	2)
•		•
	med in the complain	nt, attach additional pages providing
II. PARTIES		
A. Plaintiff Information		
Provide the following informatio pages if needed.	n for each plaintiff r	named in the complaint. Attach additional
Ernest	1	Calvino
		Last Name
3600 Avenue	Serome.	Avenue
Street Address		:
Bronk	<i>N</i>	4 10467
County, City	State	Zip Code
Telephone Number	Email /	Address (if available)

## B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:							
	First Name	Last Name					
	Current Job Title (or other identifying information)						
	Current Work Address (or other address where defendant may be served)						
	County, City	State	Zip Code				
Defendant 2:							
	First Name	Last Name					
	Current Job Title (or other identifying information)						
	Current Work Address (or other address where defendant may be served)						
	County, City	State	Zip Code				
Defendant 3:							
	First Name	Last Name					
	Current Job Title (or other identifying information)						
	Current Work Address (or other address where defendant may be served)						
	County, City	State	Zip Code				

Defendant 4:			
	First Name	Last Name	
	Current Job Title (or othe	r identifying information)	
	Current Work Address (o	r other address where defend	dant may be served)
	County, City	State	Zip Code
III. STATEMEI	NT OF CLAIM		t , (
Place(s) of occurr	ence: Citi	y hall and h	holyoke Court
Date(s) of occurre	ence: Dif. T	)ates	
FACTS:			
	at each defendant persona	our case. Describe what hap ally did or failed to do that h	
I W		ew times to	o city hall
in holyol		if I had a	bussnes_
under me	'	sk if I was	married
there bec	quse i am a	victem of I	Dtheft
because	Annonimous	witness said	that i
had Bu	ssnes and t	that I was	married there
they say		was nothing	
name, D	e They denie	ed acces to h	iolyoke Ditrict
court be	cause they d	ont went co	elliphone inside
court tha	I happend 2	time or more	, in a different
Ocations	I went insi	de the cleack	office asking
if I wa	s Sue in the	of court they	told Me
that the	eve nothing	there, that H computer u	ney dont
See not	thing on the	computer u	ITH WE MANNE

INJURIES:
If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.  Emotiona  Distress
IV. RELIEF
State briefly what money damages or other relief you want the court to order.
Money, Estimate value pending
Justice + my Asset, transer of civil
Document to the united States District
court, Southern District of New york

## V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

(2/18/2019		Eunest	Calvino
Dated		Plaintiff's Signatu	
Emest	Jr	Calvino	
First Name	Middle Initial	Last Name	
3600 Jerom	e Aver	lue	
Street Address	•		
Bronx		NY	10467
County, City		State	Zip Code
Telephone Number		Email Address (if	available)
I have read the Pro Se (Non ☐ Yes ☐ No	prisoner) Conse	ent to Receive Docume	ents Electronically:
If you do consent to reco	eive documents e	electronically, submit the	completed form with your

complaint. If you do not consent, please do not attach the form.